COMMONWEALTH OF MASSACHUSETTS Board of Registration in Pharmacy

NOTICE OF THE REGULARLY SCHEDULED MEETING OF THE BOARD OF REGISTRATION IN PHARMACY

July 24, 2020

Webex Information

Call in Number: 1-203-607-0564 or toll free 1-866-692-3580

Access Code: 161 186 4183

Attendee: #

If you need reasonable accommodations in order to participate in the meeting, contact the DPH ADA Coordinator Yulanda Kiner, Phone: 617-624-5848 in advance of the meeting. While the Board will do its best to accommodate you, certain accommodations may require distinctive requests or the hiring of outside contractors and may not be available if requested immediately before the meeting.

Time	#	Item	Page	Contact
8:00	Ι	CALL TO ORDER		K. Tanzer
	II	APPROVAL OF AGENDA		
	III	 APPROVAL OF BOARD MINUTES Draft of July 17, 2020 Regular Session Minutes 		
8:05	IV	 REPORTS Applications approved pursuant to Licensure Policy 13-01 Monthly report from probation Board Delegated Review pursuant to Licensure Policy 14-02 Above Action Levels approved by Staff Action 16-04 PSUD Report-Policy 17-03 		

Agenda

8:10	V	 APPLICATIONS Williamstown Apothecary – Change in application Anchor Home Medical & Pharmacy – New Community Pharmacy Baker Pharmacy; DS12518 – Transfer of Ownership 		
8:30	VI	FILE REVIEW 1 PHA-2020-0023 CVS #137, DS2951 2 PHA-2020-0033 CVS #2283, DS2844 3 PHA-2020-0034 CVS #2125, DS2763 4 PHA-2020-0035 Guadalupe Arambula, PTT07986		
9:00	VII	 POLICIES and ADVISORIES Staff Action Policy 16-04: Staff Action to Handle Above Action Level Results Staff Action Policy 17-02: Approval of Pharmacy Technician Training Programs and Examinations Joint Policy 2020-06: Continuation of Drug Therapy upon Discontinuation of a Prescriber's Practice Policy 2020-07: Naloxone Dispensing Joint Policy 2020-08: Expedited Partner Therapy Prescriptions Joint Policy 2020-09: Emergency Contraception Standing Order Advisory: Sterile Compounding Pharmacy Response to HVAC Excursions Advisory: Pharmacy Response to Failed HEPA Filters in ISO- Classified Environments Memo regarding Revocation of Board Policy 2010-02: Joint Guidelines for the Use of Automated Pharmacy Systems for the Storage and Dispensing of Schedule VI Controlled Substance Prescriptions in Pharmacies 		W. Frisch M. Chan
9:20	VIII	FLEXPharmacy issues related to Covid-19 and the state of emergency		

9:30	IX	EXECUTIVE SESSION The Board will meet in Executive Session as authorized pursuant to M.G.L. c. 30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. Specifically, to evaluate the Good Moral Character as required for registration for a pending applicant.	
10:00	X	M.G.L. c. 112, § 65C SESSION	
10:30	XI	ADJOURNMENT	

COMMONWEALTH OF MASSACHUSETTS BOARD OF REGISTRATION IN PHARMACY

MINUTES OF THE GENERAL SESSION Meeting held via WEBEX remotely Boston, Massachusetts, 02114 July 24, 2020

Board Members Present

Board Members Not Present

Kim Tanzer, PharmD, RPh. PresidentPatrick Gannon, RPhJulie Lanza, CPhT, President Elect (arrives 8:18 AM; leaves 8:55 AM)Leah Giambarresi, Pharm D, RPh, SecretarySebastian Hamilton, Pharm D, RPhDr. Richard Lopez, MD (leaves 9:46 AM and back at 10:06 AM)Andrew Stein, Pharm DTimothy Fensky, RPhCarly Jean-Francois, RN, NP (arrives 8:06 AM; leaves 10:15 AM)Katie Thornell, RPh (arrives 8:16 AM; leaves at 9:37 AM)Susan Cornacchio JD, RNStephanie Hernandez, Pharm D, BCGP, RPhDawn Perry, JD (leaves at 10:15 AM)

Board Staff Present

David Sencabaugh, RPh, Executive Director Monica Botto, Assistant Executive Director Heather Engman, JD, Board Counsel William Frisch, RPh Director of Pharmacy Compliance Michelle Chan, RPh Quality Assurance Pharmacist Joanne Trifone, RPh, Director of Investigator Julienne Tran, PharmD RPh, Investigator Gregory Melton, Pharm D, JD, RPh Investigator Christina Mogni, RPh Investigator Michael Brosnan, PharmD, RPh Investigator Steve Horn, RPh Investigator Paul Seed, RPh Investigator Ed Taglieri, MSM, NHA, RPh, PSUD Supervisor Joanna Chow, Office Support Specialist Richard Harris, Program Analyst

TOPIC I. Attendance by roll call: CALL TO ORDER 8:00 AM

A quorum of the Board was present, established by roll call. President K. Tanzer chaired the meeting. She explained that the Board of Pharmacy was recording the meeting.

Roll call attendance: K. Tanzer, yes; L. Giambarresi, yes; D. Perry, yes; S. Hamilton, yes; S. Cornacchio, yes, Dr. Lopez, yes; T. Fensky, yes; S. Hernandez, yes; Andy Stein, yes.

Topic II.

Approval of Agenda

TIME 8:01 AM

Agenda July 24, 2020

DISCUSSION:

Change to Agenda:

1. none

ACTION:

Motion by L. Giambarresi, seconded by S. Hernandez and voted unanimously by those present by roll call vote to approve the agenda with no changes.

Topic III	Approval of Board Minutes	TIME: 8:02 AM
Minutes 1. Draft 7/17/20 G	eneral Session Minutes	
No noted Changes.		
•	ton, seconded by L. Giambarresi and voted unanimou minutes of 7/17/20 with no noted changes.	usly by roll call vote to approve
Topic IV	Reports:	
Applications approv Presented by: Richa Discussion:	ved pursuant to Licensure Policy 13-01 ard Harris	Time: 8:03 AM
So noted	• 54 Change in Manager of Record	
Monthly Report fro Presented by: Richa Discussion:		Time: 8:03 AM
	 1 Successfully completed 13 Successfully completed for the year 29 Active cases 	
So noted		

Monthly Report from BDCR pursuant to Policy 14-02
Presented by: Monica Botto
Discussion:

6 CE violations

So noted

Above Action Levels Approved by Staff Action 16-04	Time: 8:04 AM
Presented by: Julienne Tran	
3 Above Action Level	
So noted	
PSUD report by Staff Action 17-03	Time: 8:05 AM
Presented by: Ed Taglieri	
 2 Completed the program 	
 13 Active participants 	
So noted	

Time: 8:04 AM

Carly Jean Francoise joins meeting 8:06AM Katie Thornell joins meeting 8:16 AM Julie Lanza joins meeting 8:18 AM

ΤΟΡΙϹ V	Applications	
1. Williamstown Apothecary	Change to Application	Time: 8:05 AM

Represented by: Keith Preston, David, and Sarah Roberts **Recusal:** None

Discussion: The pharmacy's goal is to cater to Williams College and the community at large, to provide the best care with after-hours prescription pick-up. The Williams health clinic is run by Berkshire Health Systems. They have 10 years of policies and procedures in place, with no incidents. There have been no issues with their other Script Center location.

The Script Center unit at Williamstown Apothecary is bolted to the floor in the vestibule between the outside and the pharmacy. The door to the outside is open to the public 24/7 and the door to the pharmacy is locked after hours. This kiosk is just for pick-ups of refilled schedule VI medications only, no refrigerated items. It is a solid machine; much like an ATM and the transaction is quick. The Script Center has integrated barcode scanning, one for patient and one for each bag. The unit will be filled three times per day during business hours. Medication stays in the Script Center for 10 days, if not picked up, it is pulled out. The vestibule is climate controlled with its own HVAC system, monitored by BMC.

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They do not have any answer for the number of students or patients they will be servicing via the Script Center. There is a toll-free number the patients can call after hours if they have any questions about their prescription. For security, there is live monitoring at BMC of the 24/7 cameras on the vestibule. The advantage is for customers who do not want to wait in line and for those who like technology. Customers do not want to enter the building because of COVID, so this would help.

The Board has security concerns with the exterior door of the vestibule being unlocked 24/7. It is open to the public and that creates safety concerns for patients that go into pick-up their script and could get attacked from behind. Additional security measures discussed included the addition of a panic button in the vestibule and a key fob entry for afterhours access to the vestibule. Williamstown Apothecary representatives will talk with security team about installing a panic button in the vestibule. Technology is not there for them to install key fobs for each customer to be given to get in after hours.

Approval would be contingent upon the implementation of adequate security provisions, such as a panic button, posting of signage indicating no narcotics are stored in the Script Center and documentation from Williamstown Apothecary that 24/7 live remote security is monitoring the machine.

Action: Motion by T. FENSKY, seconded by S. HAMILTON, and voted unanimously by roll call by those present to table discussion and vote until next week, pending security improvements.

2. Anchor Home Medical & Pharmacy New Community Pharmacy

Time: 8:34 AM

Represented by: Walter Ciampa, MOR Recusal: None

Discussion: MOR Ciampa desires to open a new community pharmacy focused on healthcare for elderly patients, helping them stay independent at home and with DME equipment. He will be providing immunizations. Compliance packaging is something he may do in the future if the need is there. Pharmacy staff will be him and 1 or 2 technicians. K. TANZER spoke of the requirement for technician trainees to be licensed. When the pharmacy is closed, he will be on call; store phone will connect to his phone. He has previous MOR experience. The proposed space is not a free-standing building; it is a part of a strip mall. The only access is through the front door and back door. The building is made of older hard brick walls and it has a drop ceiling and metal roof. To the left is Flip My Bird and to the right is Dunkin Donuts. There's also a pizza shop a couple doors down with a lot of security cameras already in place. There will be 2 panic buttons and 3 motion detectors in the pharmacy. T. FENSKY informed him that capsules, suppositories, and troches are complex compounding. MOR Ciampa will remove that from his application and resubmit it. He does not want to compound but will if elderly patients need it or is cost-effective.

Action: Motion by L. GIAMBARRESI, seconded by S. HAMILTON, and voted unanimously by roll call by those present to approve the new license pending successful inspection and an updated compounding attestation.

3. Baker Pharmacy DS12518 Transfer of Ownership

Represented by: Paul Garbarini (Attorney), Sidney Anderson, and Harsh Patel

Recusal: None

Discussion: Applicants are seeking the Board's blessing on a stock swap, for swapping corporate officers and shareholders. Anderson is the current MOR and 50% shareholder, his wife, who is not a pharmacist, is the other 50% shareholder and they are looking to transfer all 100% of the shares to Harsh Patel, licensed pharmacist. They are looking for a seamless transfer so Patel can start operations of Baker Pharmacy. Garbarini insisted that it is new individuals operating the same entity, Baker Pharmacy. This could be done administratively through 603.5. It is a change in control, by different shareholders but the tax identity stays the same. Ownership is not changing; same entity owns the pharmacy. Shareholders are just changing. H. ENGMAN informed applicants that with a change or transfer of ownership, a new license number is generated. That is how the Board has done it for a very long time. Garbarini further insisted that if there are any interruptions, the transaction is valueless. Anderson and Patel do not want a 3-month pause in payment cycles, where prescriptions cannot be filled. This is a stock swap, not an asset purchase agreement. Applicants requested withholding on a vote if that meant a new license would be generated and attorneys will work together to draft something suitable for both parties.

Action: Motion by A. STEIN, seconded by S. HAMILTON, and voted unanimously by roll call by those present to defer until next week.

ΤΟΡΙϹ VI	File Review	
Case #1		
PHA-2020-0023	CVS #137, DS2951	Time: 08:53 AM

<u>RECUSAL</u>: S. CORNACCHIO recused and was not present for the discussion or vote in this matter.

<u>DISCUSSION</u>: J. TRAN presented and summarized the investigative report that pertained to these matters.

- OPP received notification that CVS #137 had a loss of #60 amphetamine salts 20mg tablets on or about February 6, 2020
- MOR Dierks indicated that on Monday 2/3/20 a prescription for #60 amphetamine 60mg tablets was filled, verified and placed in the waiting bin area. When the patient came to pick up the prescription that day, the prescription could not be located.
- Pharmacist Vu performed verification on the prescription. She was also the one who identified the loss.
- Video footage was reviewed. There is video evidence of the prescription being completed but anything further could not be determined. MOR Dierks noted that they were unable to determine the reason for the loss.

• MOR Dierks reviewed best practices with the pharmacy team to include checking all prescriptions processed and bagged at point of sale. Also, MOR Dierks stated, "We have taken this opportunity to perform retraining. New hires have been and will continue to be trained and monitored for following proper procedures at the register as well as in filling and dispensing prescriptions."

<u>ACTION</u>: Motion by T. FENSKY, seconded by S. HAMILTON, and voted unanimously by those present, to refer the matter (PHA-2020-0023), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Julie Lanza leaves meeting at 8:55 AM

Case #2 PHA-2020-0033

CVS #2283, DS2844

Time: 08:55 AM

<u>RECUSAL</u>: S. CORNACCHIO recused and was not present for the discussion or vote in this matter.

<u>DISCUSSION</u>: J. TRIFONE presented and summarized the investigative report that pertained to these matters.

- Untimely RLCS on 4/10/2020 of an unknown loss of 100 morphine sulfate IR 15mg tablets on 3/28/2020. An internal investigation included review of invoices and prescription hardcopies; morphine sulfate IR 15 mg tablets and similar drugs were back counted and recounted for accuracy; and the Pharmacy was searched including the shelves, the area for returns, waiting bins, the safe, and the workbench and counters. Since the last reconciliation on 3/22/2020, only one prescription had been filled by Pharmacist Tan and that patient was contacted. MOR Mwangi stated, "The patient said they received the correct amount". Security camera footage was reviewed but was inconclusive.
- The discrepancy of #100 morphine sulfate IR 15 mg tablets was reported to MOR Mwangi on 4/10/2020 by Pharmacist Huynh who was informed of the discrepancy on 4/7/2020. Pharmacist Huynh had conducted the investigation. On 4/10/2020, MOR Mwangi instructed Pharmacist Huynh to immediately report the loss and the CVS District Leader was notified. MOR Mwangi determined that around the time of the loss, the Pharmacy was experiencing issues with staffing due to illness and increased prescription volume due to the pandemic. The Pharmacy was also having an issue with correct balance on hand (BOH) in the electronic perpetual inventory. When the discrepancy was initially identified on 3/29/2020, Pharmacist Tan did not adjust the BOH to reflect the actual quantity in stock which would have triggered a potential drug loss alert. Additionally, Pharmacist Maloney, who performed the reconciliation of the perpetual inventory on 4/5/2020, incorrectly adjusted the inventory in a manner that did not flag a potential drug loss. MOR Mwangi ascertained, "The incorrect adjustment was also not reconciled for five days and therefore the perpetual inventory did not reflect a potential loss".
- MOR Mwangi reviewed the laws, regulations, and CVS policy regarding the reporting requirements for controlled substance losses with all pharmacists. The procedure for appropriately adjusting BOH discrepancies and reconciling perpetual inventory adjustments was also reviewed. All the pharmacists involved received a verbal warning from MOR Mwangi and indicated that failure to timely report future

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losses will result in further disciplinary action that may include termination of employment. MOR Mwangi had all pharmacists involved complete 2 CEs in medications errors and review 247 CMR 15 in its entirety (copies provided).

<u>ACTION</u>: Motion by S. HAMILTON, seconded by T. FENSKY, and voted unanimously by those present, to refer the matter (PHA-2020-0033), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #3 PHA-2020-0034 CVS #2125, DS2763 Time: 09:00 AM

<u>RECUSAL</u>: S. CORNACCHIO recused and was not present for the discussion or vote in this matter.

<u>DISCUSSION</u>: J. TRIFONE presented and summarized the investigative report that pertained to these matters.

- Unknown RLCS on 4/20/20 discovered on 4/5/2020 when a customer went to the Pharmacy to pick a prescription for 60 hydromorphone 4 mg tablets filled on 3/23/2020 and it could not be located in the waiting bins. The Pharmacy was searched including the refrigerators and safes with multiple searches of all the waiting bins. All RTS vials on the shelves were also searched. A review of security footage was inconclusive.
- MOR Hall reviewed the security footage of the prescription in question being filled on 3/23/2020. Pharmacist Rustum was observed filling the prescription at the QA station then placing the bagged prescription in the waiting bin. MOR Hall contended the bin is out of view of the camera but she assumed by Pharmacist Rustum's movement that it was placed in the bin. MOR Hall questioned Pharmacist Rustum who recalled filling the prescription for #60 hydromorphone 4 mg tablets but did not know where it may have gone.
- MOR Hall stated that on 4/5/2020, she dispensed the hydromorphone 4 mg tablets using the original prescription which caused a discrepancy in the perpetual inventory. The perpetual inventory was not adjusted to reflect the actual BOH until 4/10/2020.
- All loss prevention policies and procedures, including diligent dispensing standards and the back counting of all narcotic, were reviewed with the pharmacy team to prevent future losses. MOR Hall moved the waiting bin for filled CII prescriptions to the countertop behind the pharmacist in full view of the cameras. MOR Hall asked the CVS District Leader to consider changing the placement of the security cameras since not all waiting bins are in view of the cameras. MOR Hall completed 1 CE in medication errors and 1 CE related to the prevention of controlled substance diversion and attested to reviewing 247 CMR 15 in its entirety.

<u>ACTION</u>: Motion by S. HAMILTON, seconded by T. FENSKY, and voted unanimously by those present, to refer the matter (PHA-2020-0034), to the Office of Prosecution for the issuance of an order to show cause and to authorize resolution of the matter by a consent agreement for REPRIMAND.

Case #4		
PHA-2020-0035	Guadalupe Arambula, PTT07986	Time: 09:07 AM

<u>RECUSAL</u>: S. CORNACCHIO recused and was not present for the discussion or vote in this matter.

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<u>DISCUSSION</u>: C. MOGNI presented and summarized the investigative report that pertained to these matters.

- On 03/25/2020, the BORP received a PTT license application for PTT Arambula which was issued on 05/19/2020. Subsequently, the BORP staff determined the social security number provided on the application was invalid. The BORP staff attempted to contact PTT Arambula via phone, email, and mail in April 2020 but no response was received.
- On 06/19/2020, a copy of PTT Arambula' s social security card was received. PTT Arambula stated, "I have provided a copy of my SSN. I've mailed a copy before, about a month ago. I'm not sure why there was a discrepancy". The first number of the social security number indicated on the PTT application was incorrect when compared to the social security card. All other numbers were recorded correctly.
- PTT Arambula is currently employed at CVS Pharmacy #114.

<u>ACTION</u>: Motion by L. GIAMBARRESI, seconded by C. JEAN-FRANCOIS, and voted unanimously by those present, to DISMISS the matter (PHA-2020-0035), No Violation.

TOPIC VIIPolicies and Advisories:1. Staff Action Policy 16-04: Staff Action to Handle Above Action Level ResultsTime: 9:09 AM

Presented by: M. CHAN

Recusal: None

Discussion: Staff action policy 16-04 allows Board staff to respond to Environmental Monitoring Above Action Levels in sterile compounding environments. The edits remove the regulatory citations and now refer to the Board policy that was approved last November.

Action: Motion by S. HAMILTON, seconded by L. GIAMBARRESI, and voted unanimously by roll call by all those present to approve the policy changes.

2. Staff Action Policy 17-02: Approval of Pharmacy Technician Training Program and Examinations Time: 9:12 AM

Presented by: M. CHAN

Recusal: None

Discussion: Staff action policy 17-02 allows Board staff to approve pharmacy technician training programs and licensing exams. It was edited to be consistent with the Board policy that was revised in May.

Action: Motion by S. HAMILTON, seconded by A. STEIN, and voted unanimously by roll call by all those present to approve the policy changes.

3. Joint Policy 2020-06: Continuation of Drug Therapy upon Discontinuation of a Prescriber's Practice Time: 9:13 AM

Presented by: M. CHAN

Recusal: None

Discussion: This policy describes the conditions by which a pharmacist can continue established medication therapy after a prescriber ceases to practice. Edits provide additional guidance to the policy that was put into effect in 2005.

Concerns were raised regarding an emergency contingency and extending the grace period to longer than 90 days. If patients do not know for months that their prescriber had passed away, it will take them additional time to get a new prescriber. Changing to 180 days was discussed. A longer period of time is reasonable, because they might only see the prescriber once a year. Verbiage was recommended to begin the 90-day period from day of refill request.

Action: Motion by S. HAMILTON, seconded by A. STEIN, and voted unanimously by roll call by all those present to approve the policy with the recommended changes and for the changes to be ratified at the next Board meeting.

4. Policy 2020-07: Naloxone Dispensing

Time: 9:37 AM

Presented by: M. CHAN

Recusal: None

Discussion: This policy combines the two existing naloxone policies: the one that allows off-site dispensing and the one that describes the general dispensing and reporting requirements. The statewide standing order will remain attached for convenience.

The verbiage "Naloxone Rescue Kit" was requested to be used in place of the name and address on the prescription label even when billed through the purchaser's insurance.

Action: Motion by L. GIAMBARRESI, seconded by S. HAMILTON, and voted unanimously by roll call by all those present to approve the policy with the recommended changes and for the changes to be ratified at the next Board meeting.

5. Joint Policy 2020-08: Expedited Partner Therapy Prescriptions

DEFERRED

6. Joint Policy 2020-09: Emergency Contraception Standing Order

DEFERRED

7. Advisory: Sterile Compounding Pharmacy Response to HVAC Excursions

DEFERRED

8. Advisory: Pharmacy Response to Failed HEPA Filters in ISO-Classified Environments

DEFERRED

9. MEMO: Revocation of Board Policy 2010-02: Joint Guidelines for the use of Automated Pharmacy Systems for Storage and Dispensing of Schedule VI Controlled Substance Prescriptions in Pharmacies

DEFERRED

TOPIC VIII Flex: Pharmacy Issues related to COVID-19 and the state of emergency: Presented by: David Sencabaugh

Dave notes no updates this week.

Kim Tanzer announces at 9:43 AM the general session will be ending, and the Board will be going into Executive Session and reads the reason for entering Executive Session as required. The Board will not cover any other general session items today.

Katie Thornell leaves at 9:46 AM Dr. Lopez leaves meeting 9:46 AM and rejoins meeting at 10:06 AM

Topic IX: By: K. Tanzer **Executive Session Call to Order:**

Time: 9:46 AM

<u>ACTION</u>: Motion by S. Hamilton seconded by J. Giambarresi and voted unanimously by roll call to call the 7/24/20 meeting of the Executive Session to order.

Roll call attendance: K. Tanzer, yes; L. Giambarresi, yes; T. Fensky, yes; S. Hamilton, yes; K. Thornell, yes; A. Stein, yes. C. Jean-Francois, yes; D. Perry, yes; S. Hernandez.

Topic X:

Time: 10:02 AM

DISCUSSION: None

<u>ACTION</u>: President K. Tanzer request a motion to enter M.G.L 65 c Session.

At 10:02 AM T. Fensky, seconded by L. Giambarresi and voted unanimously by all those present to enter M.G.L. chapter 65 c Session:

Carly Jean Francois leaves meeting at 10:15 AM Dawn Perry Leaves meeting at 10:15 AM

Topic XI:

ADJOURMENT OF MEETING

TIME: 10:22 AM

ACTION: Motion by S. Hamilton seconded by J. Giambarresi, and voted unanimously by those present, to adjourn from General Session.

EXHIBITS USED DURING THE OPEN SESSION OF THE MEETING

- 1. Draft Agenda of the 7/24/20 General Session
- 2. Draft Minutes of the 7/17/20 Meeting
- 3. Report on Applications approved pursuant to Licensure Policy 13-01
- 4. Report on probation
- 5. Report on Board Delegated Complaint Review to licensure policy 14-02
- 6. Report on Above Action Levels approved by Staff Action 16-04
- 7. Report on PSUD 17-03
- 8. Staff Action Policy 13-01 (Revision): Licensure Applications and Notices
- 9. Applications: Williamstown Apothecary Change in Application
- 10. Applications: Anchor Home Medial and Pharmacy New Community Pharmacy
- 11. Applications: Baker Pharmacy DS12518 Transfer of Ownership
- 12. PHA-2020-0023 CVS #137 DS2951
- 13. PHA-2020-0033 CVS#2283 DS2844
- 14. PHA-2020-0034 CVS #2125 DS2763
- 15. PHA-2020-0035 Guadalupe Arambula PTT07986
- 16. Staff Action Policy 16-04: Staff Action to Handle Above Action Level Results
- 17. Staff Action Policy 17-02: Approval of Pharmacy Technician Training Programs and Examinations
- 18. Joint Policy 2020-06: Continuation of Drug Therapy upon Discontinuation of a Prescriber's Practice
- 19. Policy 2020-07: Naloxone Dispensing
- 20. Joint Policy 2020-08: Expedited Partner Therapy Prescriptions
- 21. Joint Policy 2020-09: Emergency Contraception Standing Order
- 22. Advisory: Sterile Compounding Pharmacy Response to HVAC Excursions
- 23. Advisory: Pharmacy Response to Failed HEPA Filters in ISO-Classified Environments

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24. Memo regarding Revocation of Board Policy 2010-02: Joint Guidelines for the Use of Automated Pharmacy Systems for the Storage and Dispensing of Schedule VI Controlled Substance Prescriptions in Pharmacies

Respectfully Submitted, Leah Giambarresi, PharmD, RPh, Secretary